


<b>Name of Policy:</b>	<b>Blood Bank in the Emergency Department</b>					
<b>Policy Number:</b>	3364-108-206					
<b>Department:</b>	Pathology/Laboratory – Blood Bank					
<b>Approving Officer:</b>	Associate Professor Director, Clinical Pathology/Hematopathology					
<b>Responsible Agent:</b>	Core Lab Coordinator (Michelle Bartkowiak, MT(ASCP)SBB) Manager, Lab (Cynthia O’Connell)					
<b>Scope:</b>	Pathology/Laboratory – Blood Bank					
		<b>Effective Date:</b> 6/9/2008 Initial Effective Date: 10/1986				
<table border="0"> <tr> <td><input type="checkbox"/> New policy proposal</td> <td><input type="checkbox"/> Minor/technical revision of existing policy</td> </tr> <tr> <td><input type="checkbox"/> Major revision of existing policy</td> <td><input checked="" type="checkbox"/> Reaffirmation of existing policy</td> </tr> </table>			<input type="checkbox"/> New policy proposal	<input type="checkbox"/> Minor/technical revision of existing policy	<input type="checkbox"/> Major revision of existing policy	<input checked="" type="checkbox"/> Reaffirmation of existing policy
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**(A) Policy Statement**

The Blood Transfusion Service maintains a refrigerator containing group O, Rh negative red blood cells in the Emergency Department.

**(B) Purpose of Policy**

To provide uncrossmatched red blood cells to meet emergency needs in the Emergency Department.

**(C) Procedure**


**Section 1: Maintenance of the Refrigerator**

1. The refrigerator located in the Emergency Department Trauma Resuscitation Room is the property and responsibility of the Emergency Department. The Blood Transfusion Service monitors and records temperatures daily, and informs ED personnel of the need for maintenance or repair.
2. Two units of group O, Rh negative red blood cells are kept in the refrigerator on the “Blood Bank ” shelf at all times. The units bear the "Crossmatch Test Not Completed" label. A temperature-indicator is attached to the back of the unit. Expiration and condition of the units are checked daily by BTS technologists.

**Section 2: Procedure for the Release and Transfusion of Uncrossmatched Blood**

1. Transfusion of uncrossmatched blood must be ordered by an attending physician in the Emergency Department. The attending physician may delegate this authority to house staff.
2. The nursing staff in ED must notify the Blood Transfusion Service immediately when uncrossmatched blood is transfused. The physician must sign the release form for "Urgent Release of Uncrossmatched Blood". This form must be sent by fax (6676) to the BTS immediately for completion. Only authorized staff may access the units stored in the refrigerator. The senior nurse is responsible for the release of the blood to the physician in the Emergency Department and sending the signed form to the BTS.
3. **Units must not be removed from the refrigerator until transfusion is ordered.** Blood transported with an unstable patient must be stored in a Blood Bank cooler with sufficient ice. If the temperature indicator shows unsatisfactory temperature ranges, the units must not be transfused.
4. An appropriately labeled Blood Bank specimen of 6-ml blood in pink-top vacutainer tubes should be obtained before transfusion is given. The specimen must be sent to the Blood Transfusion Service immediately so that compatibility testing can be initiated.
5. BTS staff will crossmatch the units as soon as possible. The attending physician will be notified immediately when a positive antibody screen or incompatible crossmatch is detected.
6. The patient must be observed for adverse transfusion reaction as detailed in the UMC Nursing Guidelines for Blood Transfusion.
7. The BTS will restock the units in the refrigerator as soon as possible.

8. The use of uncrossmatched blood is investigated by an established protocol and is reviewed at Blood Utilization Review Committee meeting.

<b>Approved by:</b>  Robert L. Booth, Jr., M.D. Associate Professor Director, Clinical Pathology/Hematopathology Review/Revision Completed By: Michelle Bartkowiak, MT(ASCP)SBB	<b>Review/Revision Date:</b> 6/96 11/96 6/97 2/99 7/00 9/03 1/05 2/2007 1/2008 6/9/2008
<b>Next Review Date:</b> 6/1/2011	
<b>Policies Superseded by This Policy:</b>	

*It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.*

Reference:

AABB Standards for Blood Banks and Transfusion Services, current edition.